

APPLICATION DATA SHEET**Application Information**

Application number::

Filing Date::

Application Type::

Regular

Subject Matter::

Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

None

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form (CRF)?::

No

Number of copies of CRF::

Title ::

METHODS OF USING ISOTHIAZOLE
DERIVATIVES TO TREAT CANCER OR
INFLAMMATION

Attorney Docket Number::

540057.412USPC

Request for Early Publication?::

No

Request for Non-Publication?::

No

Suggested Drawing Figure::

Total Drawing Sheets::

Small Entity?::

No

Petition included?::

No

Petition Type::

Licensed U.S. Gov't Agency::

Contract or Grant No::

Secrecy Order in Parent Appl.?::

No

First Applicant Information

Applicant Authority Type::

Inventor

Primary Citizenship Country::

Canada ✓

Status::

Full Capacity

1-00 Given Name::

Zaihui

Middle Name::

Family Name::

Zhang

Name Suffix::

City of Residence::

Vancouver CAX

State or Province of Residence::

BC

Country of Residence::

Canada

Street of mailing address::

887 Great Northern Way

City of mailing address::

Vancouver

State or Province of mailing address::

BC

Country of mailing address::

Canada

Postal or Zip Code of mailing address::

V5T 4T5

Second Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
2-00 Given Name:: Timothy
Middle Name:: S
Family Name:: Daynard
Name Suffix::
City of Residence:: Vancouver ~~CAX~~
State or Province of Residence:: BC
Country of Residence:: Canada
Street of mailing address:: 887 Great Northern Way
City of mailing address:: Vancouver
State or Province of mailing address:: BC
Country of mailing address:: Canada
Postal or Zip Code of mailing address:: V5T 4T5

Third Applicant Information

3-00 Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given Name:: Gabriel
Middle Name:: Bela
Family Name:: Kalmar
Name Suffix::
City of Residence:: Richmond CAX
State or Province of Residence:: BC
Country of Residence:: Canada
Street of mailing address:: 887 Great Northern Way
City of mailing address:: Vancouver
State or Province of mailing address:: BC
Country of mailing address:: Canada
Postal or Zip Code of mailing address:: V5T 4T5

Correspondence Information

Correspondence Customer Number :: 00500

Representative Information

Representative Customer Number::		00500
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Domestic Priority Information

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/CA03/000864	06/11/03
PCT/CA03/000864	An application claiming the benefit under 35 USC 119 (e) of	60/388,939	06/13/02

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name::	QLT, Inc.
Street of mailing address::	887 Great Northern Way
City of mailing address::	Vancouver
State or Province of mailing address::	BC
Country of mailing address::	Canada
Postal or Zip Code of mailing address::	V5T 4T5